DOCUMENT RESUME

ED 250 445 CE 039 787

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TITLE Kidney Dialysis Patients Discover New Hope through ABE Program.
PUB DATE 7 Nov 84
NOTE 9p.; Paper presented at the National Adult Education Conference (Louisville, KY, November 7-11, 1984).
PUB TYPE Reports - Descriptive (141) -- Speeches/Conference Papers (150)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Adult Basic Education; Basic Skills; *Cooperative Planning; Cooperative Programs; Coping; Daily Living Skills; Educational Benefits; Educational Cooperation; Exercise; High School Equivalency Programs; *Individualized Instruction; *Medical Services; *Patient Education; Physical Fitness; Program Development; Program Implementation; *School Community Relationship; Self Concept; Skill Development
IDENTIFIERS *Kidney Dialysis; West Virginia (Charleston)

ABSTRACT

A program was developed to provide adult basic education (ABE) to kidney patients while they are receiving dialysis treatment. The program, which relies on an individualized learning approach, involved the coordinated efforts of the following parties: West Virginia Dialysis Facilities, Inc.; the Charleston Renal Group; and the Kanawha County Adult Basic Education Program. As of November 1984, approximately 45 individuals of the 60 receiving treatment at the dialysis facility were enrolled in the program. Instruction was provided to these patients in the following subject areas: basic academic skills, skill improvement, preparation for the General Educational Development Test, basic life-coping skills, and exercise. After 13 months of operation, the program had gained a high level of acceptance by the unit's staff and by the program participants; participants looked forward to the days when they would have something to do while receiving dialysis treatment, were proud of their achievements in the program, seemed to lose some of their feelings of nervousness toward the treatment, and manifested an overall improvement in their self-concept and self-esteem levels. The sensitivity of the teachers to patients' individual needs, the program's flexibility, and the use of the individualized learning approach were cited as the three factors most responsible for the success of the program. (MN)

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1984 AAACE NATIONAL ADULT EDUCATION CONFERENCE

NOVEMBER 7-11, 1984
LOUISVILLE, KENTUCKY

TITLE OF PRESENTATION: "KIDNEY DIALYSIS PATIENTS DISCOVER NEW HOPE THROUGH ABE PROGRAM"

DATE OF PRESENTATION: WEDNESDAY, NOVEMBER 7, 1984
5:00 p.m.

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"KIDNEY DIALYSIS PATIENTS DISCOVER NEW HOPE THROUGH ABE PROGRAM"

ABSTRACT

Kidney dialysis patients are participating in a new program of individualized adult education developed by the Kanawha County Adult Basic Education program. Through the practice of an individualized learning approach, the patients not only improve their education opportunities but find an outlet which enables them to develop a healthier self-concept and focus on the future with new vigor and interest.

INTRODUCTION

A new concept in providing adult learners with adult basic education instruction has been developed at a kidney dialysis unit in Charleston, West Virginia. This unique program approach takes place at the West Virginia Dialysis Facilities, Inc., in conjunction with the Charleston Renal Group and the Kanawha County Adult Basic Education program. Through coordinated efforts of these three administrative structures, a successful adult basic education program has been developed to serve individuals who are receiving kidney dialysis treatment. This successful effort with the dialysis class may be the first of its type in the United States.

PROGRAM DEVELOPMENT AND IMPLEMENTATION

Individuals who have experienced kidney failure must rely on dialysis treatment (artificial kidney) to substitute the necessary functions normally performed by their own kidneys. There are approximately 60 individuals at this facility who must receive dialysis treatment for survival. Most of these individuals will receive three to six hours of dialysis treatment three days each week. Since a lot a time is obligated for such treatment, it was a prime

opportunity to provide constructive and beneficial learning experiences to these prospective adult learners.

The summer of 1983 marked the planning stages of this unique idea in offering kidney dialysis patients adult basic education instruction. A representative from the Kanawha County Schools' Adult Basic Education program worked diligently with the facility's social worker in making the necessary arrangements. The main objective in the minds of those who conceived the program was to take advantage of a large block of passive time and offer individualized learning experiences that would meet immediate needs. However, dialysis patients are often a laborious population to reach. They are often very skeptical and unwilling to participate in self-development activities due to their illness. Their feelings of self-worth reflect a negative self-concept. In addition, the history of such educational programs with the unit was not encouraging. In the past, other "outside programs" have been tried and were not successful. Ignoring historical precedent and the "hard-to-reach" population implications, a program was put together.

In September 1983, adult basic education classes began at the dialysis unit and were initially scheduled two days each week, six hours each day. However, this program has expanded to four days per week with 18 hours of instruction. This schedule would allow the instructor to work with four different groups of patients since their treatment schedule is on a rotating basis. The following instruction areas are provided to the interested student-patients:

- Basic Academic Skills
  (Reading, Writing, and Math)
- Upgrading or Improving Basic Skills

- Preparation for the General Education Development Test (Equivalent to a high school diploma)

- Basic Life-Coping Skills
  (Community Resources, Consumer Economics, Occupational Knowledge, Health, and Government and Law)

- Exercise classes are held for general fitness

To day, there has been a total of 45 student-patients (ages 19 to 70) enrolled in this adult basic education class. Six of these students are relatives of the patients, who find it advantageous to participate in this learning opportunity instead of idling the hours away while waiting for the trip back home.

CHARACTERISTICS OF DIALYSIS STUDENT PATIENT

Individuals who must rely on dialysis treatment for means of survival often have poor self-image and limited reading and math skills which in turn, affect their overall ability to cope with their situation. Table I indicates there are 13 males and 32 females enrolled in this program: 25 participants completed nine to twelve years of formal education, 19 participants completed five to eight years of formal education. However, the data in Table II shows the reading level upon program entry is considerably lower. These results may be due to the individuals illness which prevented him/her from attending school on a regular basis.

TABLE I

LEVELS OF FORMAL EDUCATION BY
DIALYSIS STUDENT-PATIENTS

CATEGORY	YEARS COMPLETED		
BY GENDER	0-4	5-8	9-12
MALE	1	6	6
FEMALE	0	13	19
TOTAL	1	19	25

TABLE II

ACTUAL READING PROFILE OF DIALYSIS STUDENT-PATIENTS
UPON ENTRY INTO PROGRAM

CATEGORY	READING LEVEL UPON ENTRY		
BY GENDER	0-4	5-8	9-12
MALE	3	5	5
FEMALE	8	14	10
TOTAL	11	19	15

OBSTACLES IN PROGRAM IMPLEMENTATION

In the development of any new program, there are obstacles that must be overcome. The first obstacle is acquiring the right individual to facilitate the desired program. The success of failure of any special program, such as the dialysis unit ABE class, totally depends on the person who is responsible for its implementation. The instructor of this particular class holds a Bachelor of Arts degree in Rehabilitation Counseling. This preparation, along with a wide range of experiences, has proven to be extremely effective with this population. The dialysis unit ABE class can attribute much of its success to the instructor.

Another obstacle is the initial feelings and fears the instructor possessed at the beginning of this program and the ability to place these feelings in perspective. Originally, there was a strong fear of being rejected by the student-patients and staff. In addition, there was some concern about being able to succeed in an atmosphere of sickness and despondency. However, from the outset there was a very supportive staff and much enthusiasm among the participants who wanted to open up and share their individual feelings about personal growth. The individual approach which is practiced in the dialysis adult basic education class allows not only the participants and instructor the opportunity to obtain a positive working relationship but also allows the other staff members to experience this same feeling, too. The general attitude on the part of all must be one of determination and optimism to deliver a successful program. Other program obstacles are listed below:

1. Instructor frustrations
2. Staff reservations
3. Realistic Goal Setting (by participants)

4. Participants resistance to structured activities

5. Treatment is primary; Educational goals are secondary

6. Low family support

7. Low motivational level

PROGRAM RESULTS

The dialysis unit ABE class has been in operation for a period of 13 months. Due to the high level of acceptance by the unit's staff and participants this class has been expanded to four days each week. In addition, there are at least four noticeable outcomes as a result of this program.

1. Participants look forward to the days when they have something to do while on the dialysis machines - learning.

2. Participants are proud of their achievements by participating in the individualized instructional activities.

3. Participants seem to become "unaware" of the machines to which they are connected for treatment, while they are involved in the learning activities. As a result, their feelings of apprehensiveness and nervousness toward their treatment process is lessened.

4. The overall improvement of the participants self-concept and self-esteem directly affects their ability to respond more effectively to the dialysis treatment.

SUMMARY

The basic idea behind this unique ABE class is to provide learning opportunities to a group of individuals who have special needs. It offers a wide variety of learning activities and self-awareness activities to promote effective personal growth among the participants.

The success of this program appears to rest on three key elements. The teaching approach appears to be one of those keys. The instructor is constantly aware of each students-patient's physical condition, learning needs, and overall emotional state. The instructor's first task was to get to know each individual

as a person and to build a relationship of trust. The other two keys are closely allied; flexibility and an individualized approach to learning.

Of these three, it appears that the most important one is the instructor. While there may be some advantage to use a person with an educational degree and ABE work experience, it may not be necessary. The Kanawha County experience would suggest that adult counseling and motivational techniques, understanding of adult personality and behavior styles and good listening skills might be the secret ingredients when working with such a population.